


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 31 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT, 1997,				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>M 72403</i> 1. Corporation Name TENNIS PARTNERS MANAGEMENT, INC.					
Principal Place of Business			Mailing Address		
2400 N.W. 55TH AVENUE MARGATE, FL. 33063			2400 N.W. 55TH AVENUE MARGATE, FL. 33063		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 State, Apt. #, etc.		26 Suite, Apt. #, etc.		1988	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		04-3023435	
25 Country		30 Country		5. Certificate of Status Desired <input type="checkbox"/>	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
DAVID G. FUNK 2330 N.W. 53RD STREET BOCA RATON, FL. 33496			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			85 Zip Code		
			FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and I agree to the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE <i>[Signature]</i>			DAVID G. FUNK		
			2/24/97		
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE <input type="checkbox"/> CHANGE <input type="checkbox"/> ADDITION 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input type="checkbox"/> Change <input type="checkbox"/> Addition					
12.1 TITLE: PRESIDENT 12.2 NAME: FUNK, DAVID G. 12.3 STREET ADDRESS: 2330 NW 53RD STREET 12.4 CITY-STATE-ZIP: BOCA RATON, FL. 33496			13.1 TITLE: 13.2 NAME: 13.3 STREET ADDRESS: 13.4 CITY-STATE-ZIP:		
12.5 TITLE: VICE PRESIDENT 12.6 NAME: KATZEFF, RICHARD A. 12.7 STREET ADDRESS: 123 COONAMESSETT CIRCLE 12.8 CITY-STATE-ZIP: E. FALMOUTH, MA 02536			13.5 TITLE: 13.6 NAME: 13.7 STREET ADDRESS: 13.8 CITY-STATE-ZIP:		
12.9 TITLE: 12.10 NAME: 12.11 STREET ADDRESS: 12.12 CITY-STATE-ZIP:			13.9 TITLE: 13.10 NAME: 13.11 STREET ADDRESS: 13.12 CITY-STATE-ZIP:		
12.13 TITLE: 12.14 NAME: 12.15 STREET ADDRESS: 12.16 CITY-STATE-ZIP:			13.13 TITLE: 13.14 NAME: 13.15 STREET ADDRESS: 13.16 CITY-STATE-ZIP:		
12.17 TITLE: 12.18 NAME: 12.19 STREET ADDRESS: 12.20 CITY-STATE-ZIP:			13.17 TITLE: 13.18 NAME: 13.19 STREET ADDRESS: 13.20 CITY-STATE-ZIP:		
12.21 TITLE: 12.22 NAME: 12.23 STREET ADDRESS: 12.24 CITY-STATE-ZIP:			13.21 TITLE: 13.22 NAME: 13.23 STREET ADDRESS: 13.24 CITY-STATE-ZIP:		
12.25 TITLE: 12.26 NAME: 12.27 STREET ADDRESS: 12.28 CITY-STATE-ZIP:			13.25 TITLE: 13.26 NAME: 13.27 STREET ADDRESS: 13.28 CITY-STATE-ZIP:		
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12.37 TITLE: 12.38 NAME: 12.39 STREET ADDRESS: 12.40 CITY-STATE-ZIP:			13.37 TITLE: 13.38 NAME: 13.39 STREET ADDRESS: 13.40 CITY-STATE-ZIP:		
12.41 TITLE: 12.42 NAME: 12.43 STREET ADDRESS: 12.44 CITY-STATE-ZIP:			13.41 TITLE: 13.42 NAME: 13.43 STREET ADDRESS: 13.44 CITY-STATE-ZIP:		
12.45 TITLE: 12.46 NAME: 12.47 STREET ADDRESS: 12.48 CITY-STATE-ZIP:			13.45 TITLE: 13.46 NAME: 13.47 STREET ADDRESS: 13.48 CITY-STATE-ZIP:		
12.49 TITLE: 12.50 NAME: 12.51 STREET ADDRESS: 12.52 CITY-STATE-ZIP:			13.49 TITLE: 13.50 NAME: 13.51 STREET ADDRESS: 13.52 CITY-STATE-ZIP:		
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12.77 TITLE: 12.78 NAME: 12.79 STREET ADDRESS: 12.80 CITY-STATE-ZIP:			13.77 TITLE: 13.78 NAME: 13.79 STREET ADDRESS: 13.80 CITY-STATE-ZIP:		
12.81 TITLE: 12.82 NAME: 12.83 STREET ADDRESS: 12.84 CITY-STATE-ZIP:			13.81 TITLE: 13.82 NAME: 13.83 STREET ADDRESS: 13.84 CITY-STATE-ZIP:		
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12.97 TITLE: 12.98 NAME: 12.99 STREET ADDRESS: 12.100 CITY-STATE-ZIP:			13.97 TITLE: 13.98 NAME: 13.99 STREET ADDRESS: 13.100 CITY-STATE-ZIP:		
14. I declare under penalty that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: <i>[Signature]</i>			DAVID G. FUNK, PRESIDENT		
			2/24/97		
			(954) 971-0014		

CR2E034 (9/96)

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JP